

Work Order ID 138441

Tuesday, October 27, 2015 11:28:29 AM

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Item ID: D3808-041 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Seat Rail Assembly
 Start Date: 10/26/2015 Start Qty: 4.00 ***4*** Cust Item ID:
 Required Date: 10/26/2015 Req'd Qty: 4.00 ***4*** Customer:
 Reference:

Approvals: Process Plan: MCS Date: OCT 29 2015 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3808	Rev A								
100	Small Fab	0.00							
100									
Small Fab	Memo	0.02							
Small Fab	1-Install Plunger as per Dwg D3808.2-Install helicoils x5 as per Dwg D3808.								
110	QCS- Inspect part completeness to step on W/O	0.00							
110									
QC	Memo	0.00							
Quality Control									
120	Identify as per dwg & Stock Location: <u>5T258</u>	0.00							
120									
Packaging	Memo	0.00							
Packaging									

4 FF NOV 05 2015

(4) DAS 38 9-89 NOV 05 2015

4X DAS 28 9-89 NOV 05 2015

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____		DISPOSITION Rework ☐ Scrap ☐ Use-as-is ☐ Suspected Unapproved ☐		AGAINST DEPARTMENT/PROCESS Skid-tube ☐ Machining ☐ Thermoforming ☐ Large Fab ☐ Cross tube ☐ Small Fab ☐ Finishing ☐ Composite ☐ Water Jet ☐ Prod. Eng. Coord. ☐ Rec/Store/Packaging ☐ Supplier ☐ Engineering ☐ Quality ☐ Other ☐					
Date :		Step #:		QTY Effective :			MRB (QSI042) Approval Completed By Lead hand / Supervisor Approval Verification QC / QA Coordinator Approval		
Description Work Order Deviation				Disposition					

Root Cause				FAULT CATEGORY							
Environment	☐	No Re-verification	☐	Pressure/Forced	☐	Temperature/Cure	☐	Power Loss/Surge	☐	Positioned Wrong	☐
Design	☐	Operator	☐	Bending	☐	Set-up	☐	Folio/Program	☐	Outside Dimensions	☐
Doc/Data	☐	Offset/Setup	☐	Centre Not Concentric	☐	BOM/Route	☐	Grain	☐	Over/Under tolerance	☐
Equip/Tooling	☐	Supplier	☐	Cracks	☐	Broken/Damage/Defect	☐	Weld	☐	Part Incorrect	☐
Handling/Pre	☐	Training	☐	Crimp/Kink/Ripple/Wave	☐	Inspection Incomplete/Unqualified	☐	Wrong Stock Pulled	☐	Part Lost/Missing	☐
Material	☐	Use for Testing	☐	Cuffs	☐	Contamination	☐	Out of Sequence	☐	Part Moved	☐
Internal Transport	☐	Poor Information	☐	Crushing	☐	Countersink	☐	Off-set	☐	Drawing	☐
Tribal Knowledge	☐	Rushing	☐	Heat Treat	☐	Cut Too Short	☐	Mislabeled	☐	Finish	☐
LOA	☐	Product Improvement	☐	Wave/Twist in Tube	☐	Instructions Incomplete/Unclear	☐	Fit/Function	☐	Misread	☐
Substation	☐	Process Improvement	☐	Marks/Chatter	☐	Drill Holes	☐	Misaligned/off center	☐	Turning Sequence	☐
Past Expiry Date	☐	Manufacturing Process	☐	OTHER :							
Misidentified	☐	Past Due	☐								

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Item ID: D3808-041

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Seat Rail Assembly

Start Date: 10/26/2015 Start Qty: 4.00

4

Cust Item ID:

Required Date: 10/26/2015 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start ***NR1***

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

130

QC21- Final Inspection - Work Order Release

0.00

130

QC

Memo

0.01

Quality Control

MCS NOV 05 2015

MCS NOV 05 2015

DQA: _____ Date: _____



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Date :		Step #:		QTY Effective :			MRB (QSI042) Approval		
Description Work Order Deviation				Disposition				Completed By	
								Lead hand / Supervisor Approval Verification	
								QC / QA Coordinator Approval	
Root Cause Environment ☐ Design ☐ Doc/Data ☐ Equip/Tooling ☐ Handling/Pre ☐ Material ☐ Internal Transport ☐ Tribal Knowledge ☐ LOA ☐ Substation ☐ Past Expiry Date ☐ Misidentified ☐ No Re-verification ☐ Operator ☐ Offset/Setup ☐ Supplier ☐ Training ☐ Use for Testing ☐ Poor Information ☐ Rushing ☐ Product Improvement ☐ Process Improvement ☐ Manufacturing Process ☐ Past Due ☐				FAULT CATEGORY Pressure/Forced ☐ Bending ☐ Centre Not Concentric ☐ Cracks ☐ Crimp/Kink/Ripple/Wave ☐ Cuffs ☐ Crushing ☐ Heat Treat ☐ Wave/Twist in Tube ☐ Marks/Chatter ☐ Temperature/Cure ☐ Set-up ☐ BOM/Route ☐ Broken/Damage/Defect ☐ Inspection Incomplete/Unqualified ☐ Contamination ☐ Countersink ☐ Cut Too Short ☐ Instructions Incomplete/Unclear ☐ Drill Holes ☐ Power Loss/Surge ☐ Folio/Program ☐ Grain ☐ Weld ☐ Wrong Stock Pulled ☐ Out of Sequence ☐ Off-set ☐ Misabeled ☐ Fit/Function ☐ Misaligned/off center ☐ Positioned Wrong ☐ Outside Dimensions ☐ Over/Under tolerance ☐ Part Incorrect ☐ Part Lost/Missing ☐ Part Moved ☐ Drawing ☐ Finish ☐ Misread ☐ Turning Sequence ☐					
OTHER :									

Picklist Print

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Work Order ID: 138441

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Parent Item: D3808-041

D3808-041

Parent Item Name: Seat Rail Assembly

Start Date: 10/26/2015

Required Date: 10/26/2015

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev:A New Issue 08-07-31 JLM Verified By:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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D3808-1		Manufactured	No			100	Each	10.0000	1	4			
D3808-1									**			DAS 28 9-89	NOV 05 2015
Seat Rail													

Location	Loc Qty	Loc Code
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ST259	10	
135627	10	

D3810-1		Manufactured	No			100	Each	16.0000	1	4			
D3810-1									**			DAS 28 9-89	
Hand Retractable Spring Plunger													

Location	Loc Qty	Loc Code
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ST054	16	
129247	4	
138052	12	

MS21209C0815		Purchased	No			100	Each	37.0000	4	16			
MS21209C0815									**			DAS 28 9-89	
Heli Coil, screw locking, red													

Location	Loc Qty	Loc Code
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ST299	7	
124525	7	
ST300	30	
m132123	30	

MS21209C6-10		Purchased	No			100	Each	11.0000	1	4			
MS21209C6-10									**			DAS 28 9-89	
Heli Coil, screw locking, red													

Location	Loc Qty	Loc Code
----------	---------	----------

ST299	11	
m130050	11	

DQA: _____ Date: _____



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		OTHER : ☐							